

# P06000145219

Division of Corporations

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To:

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Fax Number : (850) 205-0381

From:

Account Name : EMPIRE CORPORATE KTT COMPANY  
Account Number : 072450003255  
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## FLORIDA PROFIT/NON PROFIT CORPORATION

### JC FLATBED SERVICES, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

JC FLATBED SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

109 JOHNS AVE  
LEHIGH ACRES, FL 33972

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: ONE HUNDRED (100) SHARES OF COMMON STOCK HAVING A PAR VALUE OF TEN (\$10.00) DOLLARS PER SHARE.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAMON BENITEZ  
109 JOHNS AVE  
LEHIGH ACRES, FL 33972

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**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

RAMON BENITEZ  
109 JOHNS AVE  
LEHIGH ACRES, FL 33972

**ARTICLE VI DIRECTOR(S)/OFFICER(S)**

The name(s) and address(es) of the director(s)/officer(s) to this Articles of Incorporation are:

RAMON BENITEZ (D/P/S)  
ALICIA BENITEZ (D/T)  
ALEIDA LOPEZ (D/V-P)

109 JOHNS AVE  
LEHIGH ACRES, FL 33972

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

\_\_\_\_\_ day of NOVEMBER 2nd, 2006.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE:** Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1 The name of the corporation is: JC FLATBED SERVICES, INC.

2 The name and address of the registered agent and office is:

RAMON BENITEZ

(NAME)

109 JOHNS AVE.

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

LEHIGH ACRES, FL 33972

(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Ramon Benitez  
(SIGNATURE)

11-02-06

(DATE)

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 TALLAHASSEE, FLORIDA

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

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